1390643

### FORM D



## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

### FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
INIFORM LIMITED OFFERING EXEMPTION

OMB Appro	val
OMB Number:	3235-0076
Expires:	April 30, 2008
Estimated average burden	
hours per response	. 1

SEC USE ONLY

Serial

Prefix

0.0	UNIFORM LIMITED OFFERING EXEMPTION	DA L	TE RECEIVED
Name of Offering ( check if this is an LIMITED PARTNERSHIP INTERES	amendment and name has changed, and indicate change.)		
Filing Under (Check box(es) that apply)	Section 4(6)	JLOE	
Type of Filing: New Filing: Am	endment		
	A. BASIC IDENTIFICATION DAT	'A	·7 253/
1. Enter the information requested about	t the issuer		
Name of Issuer ( check if this is ARAVALI FUND LP	an amendment and name has changed, and indicate change	e.) 	1083 (
Address of Executive Offices (Number 767 3 <sup>RD</sup> AVENUE, 6 <sup>TH</sup> FLOOR, NEV	and Street, City, State, Zip Code) V YORK, NY 10017	Telephone Number (Includ 212-676-5570	ling Area Code)
	is (Number and Street, City, State, Zip Code)	Telephone Number (Includ	ling Area Code)
Brief Description of Business INVESTMENTS		٩	PROCESSED
Type of Business Organization    corporation	limited partnership, already formed	other (please specify)	AUG 1 4 2007
business trust	limited partnership, to be formed		THOMSON
Actual or Estimated Date of Incorporati Jurisdiction of Incorporation or Organiz	ation: (Enter two-letter U.S. Postal Service abbreviation fo	Year   0 6  ⊠ Actual  or State;	FINANCIAL
	CN for Canada: EN for	other foreign jurisdiction)	이터

#### GENERAL INSTRUCTIONS

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure To file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA										
2. Enter the information requested for the following:										
• Each promoter of the issuer, if the issuer has been organized within the past five years;										
<ul> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;</li> </ul>										
<ul> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and</li> </ul>										
Each general and managing partner of partnership issuers										
Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  Director  General and/or Managing Partner										
Full Name (Last name first, if individual) ARAVALI PARTNERS GP, LLC										
Business or Residence Address (Number and Street, City, State, Zip Code) 767 3 <sup>RD</sup> AVENUE, 6 <sup>TH</sup> FLOOR, NEW YORK, NY 10017										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner										
Full Name (Last name first, if individual) ARAVALI PARTNERS, LLC										
Business or Residence Address (Number and Street, City, State, Zip Code) 767 3 <sup>RD</sup> AVENUE, 6 <sup>TH</sup> FLOOR, NEW YORK, NY 10017										
Check Box(es) that Apply:  Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner										
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply:  Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner										
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner										
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply:  Promoter Beneficial Owner  Executive Officer Director General and/or Managing Partner										
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

						B. INI	ORMAT	ΓΙΟΝ AB	OUT OF	FERING				
1.	Has the	issuer s	old or do	es the issu	er intend t	o sell, to n	on-accredi	ted investo	rs in this o	ffering?			Yes	No ⊠
								olumn 2, if						
2	Wh-4:-	احتاجه والما	imum i	ractmont d		accepted f	•						\$1 A	00,000*
2.				vestment t	iai wili be	accepted 1	form any m	igi viduai :					91.0	00,000
	*MAY E	E WAI	VED											
3.	Does the	offerin	g permit	joint own	ership of a	single uni	t?						Yes	No □
4.	any com the offer SEC and	mission ing. If: /or with associa	or simil a person n a state o	ar remune to be listed or states, li	ration for s d is an asse st the nam	solicitation ociated per e of the bro	of purchas son or age oker or dea	sers in cont nt of a brok tler. If mot	nection wit ter or deale re than five	directly or in the sales of ser registered (5) person for that be	ecurities in d with the is to be			N/A
Full	Name (L	ast nam	e first, if	findividua	i)									
	-			<u> </u>		. 6:	- 7: C	1.5						
Bus	iness or R	esidenc	e Addres	ss (Numbe	r and Stree	et, City, Sta	ate, Zip Co	ae)						
Nan	ne of Ass	ociated	Broker o	r Dealer			<u> </u>							
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•										fet 1		[HI]	[ID]	All States
[AL [IL]		-	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [Ml]	[GA] [MN]	[MS]	[MO	)]
[M]	n] [N	-	[NV]	(NH)	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK] [WI]	[OR] [WY]	[PA] [PR]	
[RI]			[SD]	[TN] f individua	[XX]	[UT]	[VT]	[VA]	[WA]	[WV]	[wij	[WI]	[רּג]	
Lan	i Name (L	asi nam	IC 11131, 11	i iliai viada	-,									
Bus	iness or F	esidenc	e Addres	ss (Numbe	r and Stree	et, City, St	ate, Zip Co	de)			·			
Nar	ne of Ass	ciated	Broker o	r Dealer										
Stat	tes in Whi	ch Perc	on Lister	Has Solid	ited or Int	ends to So	licit Purch	asers						· <u>.</u> .
				individual										□ All States
[AL		-	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL] [M]			[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MC [PA]	
[RI]			[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full	l Name (L	ast nam	ne first, if	findividua	l)									
				(3 t - t			-t- 7:- 0	4.						
Bus	siness or F	esideno	e Addre	ss (Numbe	r and Stre	et, City, St	ate, Zip Co	oae)						
Nar	ne of Ass	ociated	Broker o	r Dealer										
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•									וחכז	fer 1		 [µn	[ID]	□ All States
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[M	T] [N	E]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA] [PR]	
[RI	] [S	حا	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[W1]	[WY]	[rrc]	1

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

	C. OFFERING PRICE, NO. OF INVESTORS, EXPENSES AND USE OF PRO	OCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the column below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Al
	Debt	\$0	\$0
	Equity	\$0	\$0
	☐ Common ☐ Preferred	\$0	\$0
	Convertible Securities (including warrants)	\$0	\$0
	Partnership Interests	\$500,000,000.00*	\$87,828,316
	Other (Specify)	\$0	\$0
	Total	\$500,000,000.00*	\$87,828,316
	Answer also in Appendix, Column 3, if filing under ULOE		<u>-</u> .
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate I Amount
			Purchas
	Accredited Investors	126	\$87,828,316
	Non-accredited Investors	0	\$0
	Total (for filing under Rule 504 only)	0	\$0
	Answer also in Appendix, Column 4, if filing under ULOE	-	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
	Type of offering	Type of Security	Dollar Am Sold
	Rule 505	N/A	N/A
	Regulation A	N/A	N/A
	Rule 504	N/A	N/A
	Total	N/A	N/A
4.a.	Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs	_ ⊠	\$ 200
	Legal Fees	$\boxtimes$	\$ 50,000
	Accounting Fees	$\boxtimes$	\$ 4,000
	Engineering Fees		<u>s</u>
	Sales Commissions (Specify finder's fees separately)		<u> </u>
	Other Expenses (identify):	$\boxtimes$	\$ 33,200
	Total	$\boxtimes$	\$ 87,400
b.	Enter the difference between the aggregate offering price given in response to Part C-Question 1 and total expenses furnished in response to Part C-Question 4.a. This difference is the "adjusted gross proceeds to the issuer."	⊠	\$499,912,60
*0	pen-ended fund; estimated maximum aggregate offering amount.		

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C-Question 4.b. above.

		Payments to Officers,		
		Directors, &		Payments
		Affiliates		Others
Salaries and Fees.	•••••••••••••••••••••••••••••••••••••••	Ĺ		<b>\$0</b>
Purchase of real estate	<del></del>	\$0 		<b>\$</b> 0
Purchase, rental or leasing and installation of machinery and equipment		\$     \$ 0		\$0
Construction or leasing of plant buildings and facilities		\$ \$ \$		\$0_
Acquisition of other businesses (including the value of securities involved in exchange for the assets or securities of another issuer pursuant to a merger		\$0		<b>\$</b> 0
Repayment of indebtedness		s 0		<b>\$</b> 0
Working Capital		s 0		\$0_
Other (specify)		\$ 0		\$0_
Column Totals		<u> </u>		\$0_ \$0_
Total Payments Listed (column totals added)		□ <u>\$</u> 0	-	
D. FEDERAL SIGNAT				
The issuer has duly caused this notice to be signed by the undersigned duly authorize signature constitutes an undertaking by the issuer to furnish to the U.S. Securities an information furnished by the issuer to any non-accredited investor pursuant to paragrap	d Exchange Commission, upon wr ph (b)(2) of Rule 502.	der Rule 505, the follo itten request of its stat	wing	
Issuer (Print or Type) ARAVALI FUND LP BY: ARAVALI PARTNERS GP, LLC ITS GENERAL PARTNER	Signature fractive	Date	7/24,	<i>(</i> 0)
Name of Signer (Print or Type)	Title of Signer (Print or Type)			
WIM VANDENHOECK	MEMBER			
ATTENTION				<del></del>

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. 5	STATE SIGNATURE
Is any party described in 17 CFR 230.262 presently sprovisions of such rule?	
See Appendix, Column 5, for state response	
<ol><li>The undersigned issuer hereby undertakes to furnish on Form D (17 CFR 239.500) at such times as required.</li></ol>	n to any state administrator of any state in which this notice is filed, a notice red by state law.
<ol><li>The undersigned issuer hereby undertakes to furnish the issuer to offerees.</li></ol>	n to the state administrators, upon written request, information furnished by
	is familiar with the conditions that must be satisfied to be entitled to the ne state in which this notice is filed and understands that the issuer claiming establishing that these conditions have been satisfied.
The issuer has read this notification and knows the content the undersigned duly authorized person.	ents to be true and has duly caused this notice to be signed on its behalf by
Issuer (Print or Type) ARAVALI FUND LP BY: ARAVALI PARTNERS GP, LLC ITS GENERAL PARTNER	Signature Date  7/24/07
Name of Signer (Print or Type)	Title of Signer (Print or Type)
WIM VANDENHOECK	MEMBER

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

WIM VANDENHOECK

# APPENDIX

1	2		3			<u> </u>		:	5	
	Intend to so accredited i Sta (Part B-	nvestors in	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of Investor and amount purchased in State (Part C-Item 2)				State ULC attach exp waiver	Disqualification under State ULOE (If yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	Limited Partnership	Number of Accredited Investors	Amount	Number of Nonaccredited Investors	Amount	Yes	No	
AL			μ			†		†		
AK								<u> </u>		
AZ										
AR				-	-	<del> </del>				
CA	<del> </del>	X	\$500,000,000*	7	\$3,000,000	0	0	N/A		
СО	<u> </u>	X	\$500,000,000*	2	\$1,800,000	0	0	N/A		
СТ		X	\$500,000,000*	5	\$3,575,000	0	0	N/A	<u> </u>	
DE		·						1		
DC	<del>                                     </del>					1				
FL		X	\$500,000,000*	16	\$9,150,000	0	0	N/A		
GA		Х	\$500,000,000*	3	\$1,500,000	0	0	N/A		
н										
ID										
IL		X	\$500,000,000*	3	\$1,000,000	0	0	N/A		
IN										
IA										
KS										
KY		X	\$500,000,000*	1	\$1,500,000	0	0	N/A		
LA										
ME										
MD		X	\$500,000,000*	2	\$1,125,000	0	0	N/A		
MA		X _	\$500,000,000*	15	\$11,220,000	0	0	N/A		
MI		X	\$500,000,000*	17	\$3,850,000	0	0	N/A		
MN										
MS									ļ	
МО										
MT								ļ	ļ	
NE								ļ	ļ	
NV								ļ. <u></u>	<u> </u>	
NH				<u> </u>					ļ	
NJ		X	\$500,000,000*	3	\$1,750,000	0	0	N/A	ļ	
NM	ļ			ļ <u>.                                    </u>	*****	ļ <u>.</u>				
NY		X	\$500,000,000*	22	\$14,808,316	0	0	N/A	<u> </u>	
NC		X	\$500,000,000*	2	\$1,000,000	0	0	N/A		
ND	ļ <u> </u>				<b>**</b> *******			B.T.C.		
ОН	ļ	X	\$500,000,000*	1	\$2,300,000	0	0	N/A	<del> </del>	
OK	1							ļ	ļ	
OR	<u> </u>	<u> </u>			<b>01</b> 000 000	<u> </u>			<del> </del>	
PA	ļ	Х	\$500,000,000*	1	\$1,000,000	0	0	N/A		
RI	ļ	Х	\$500,000,000*	1	\$500,000	0	0	N/A		
SC	1		vimum aggregate offer					<u></u>	l	

<sup>\*</sup>Open-ended fund; estimated maximum aggregate offering amount.

# APPENDIX

1	2		3		5				
	Intend to sell to non- accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)		State ULC attach exp waiver	Disqualification under State ULOE (If yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No	Limited Partnership Interests*	Number of Accredited Investors	Amount	Number of Nonaccredited Investors	Amount	Yes	No
SD									
TN									
TX	· ·	X	\$500,000,000*	16	\$22,550,000	0	0	N/A	
UT									L
VT	1								
VA	1	Х	\$500,000,000*	2	\$1,300,000	0	0	N/A	
WA		,		1					
WV									
WI		х	\$500,000,000*	3	\$900,000	0	0	N/A	
WY			\$500,000,000*	2	\$2,500,000	0	0	N/A	
PR									
FOREIGN		X	\$500,000,000*	1	\$1,000,000	0	0	N/A	

<sup>\*</sup>Open-ended fund; estimated maximum aggregate offering amount.

